OTILITY PATENT APPLICATION TRANSMITTAL

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Mail Stop: Patent Application

| Attorney | Docket | No. |
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09792909-5746

| First Named | Inventor of | or Application | Identifie |
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| | | or appropriation | 100110110 |

Kazunari Motohashi

Express Mail Label No: EV328248317US

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 **APPLICATION ELEMENTS ACCOMPANYING APPLICATION PARTS** See MPEP chapter 600 concerning utility patent application contents. 1. 🗵 Specification Total Pages 25 5. 🗵 Assignment Papers (cover sheet & documentation) 2. 🗵 Drawing(s) (35USC 113) Total Pages 4 Sony Corporation 3. X **Declaration and Power of Attorney** Letter under 37 CFR 1.41(c). Total Pages 3 Unexecuted(original or copy) English Translation Document to follow (if applicable) 8. Information Disclosure Copies of IDS Copy from prior application (37CFR 1.63(d)) Statement (IDS)/PTO-1449 Citations (for continuation/divisional with Box 14 completed) [Note Box 4 Below] **Preliminary Amendment DELETION OF INVENTOR(S)** 10. 🗵 Return Receipt Postcard (MPEP 503) Signed statement attached deleting (Should be specifically itemized) inventor(s) named in the prior appln. see 37 CFR 1.63(d)(2) and 1.33(b). 11. 🔲 Small Entity ___ Statement filed in prior Application, 4. 🔲 Statement(s) Status still proper and desired Incorporation By Reference (usable if Box 3b is checked) The entire disclosure of the prior application, from which 12. (X) Certified copy(ies) of Japanese priority document(s) a Copy of the oath or declaration is supplied under Box No(s). P2002-375122 filed December 25, 2002. 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 14. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: ☐ Continuation ☐ Divisional Continuation-in-part (CIP) of application No: **CLAIMS AS FILED** (1) FOR (2) NUMBER FILED (3) NUMBER (4) RATE (5) BASIC FEE **EXTRA** \$770.00 **TOTAL** \$18.00 **CLAIMS** INDEPENDENT 86.00 **CLAIMS** ANY MULTIPLE DEPENDENT CLAIMS? 290.00 ☐ YES ⊠ NO TOTAL FEE \$770.00 The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 19-3140. A duplicate copy of this sheet is enclosed. X Please charge attorney's firm American Express Account No. <u>378571697401002</u> in the amount of \$ 770.00 to cover

A check in the amount of \$____

the above fees. PTO Form 2038 is enclosed for that purpose.

15. CORRESPONDENCE ADDRESS: Sonnenschein, Nath & Rosenthal LLP P.O. Box #061080 Wacker Drive Station - Sears Tower

to cover the filing fee is enclosed.

Chicago, IL 60606 Telephone 312/876-8000 Customer ID #26263

SIGNATURE

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David R. Metzger

Date: December 16, 2003

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